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## **Nondirected kidney donation from living donors**

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## **Nondirected kidney donation from living donors**

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Sir: Matas and colleagues [3] recently presented an interesting option for dealing with the scarcity of transplantable organs. The Minnesota transplantation program has implemented a policy of nondirected donation that allows altruistic strangers to donate a kidney. Acceptance would likely be high on the recipients' side. In the extensive interviews which we have conducted as part of our follow-up study on recipients of kidneys from living donors, many deplore the fact that the German Transplantation Law of 1997 precludes anonymous or nondirected donation (the law requires an "obviously close personal relationship with the prospective recipient" (§ 8.1)). The well-known case of a German transplant surgeon who donated a kidney to an unknown patient in 1996 [1] is often mentioned in this context. Whereas the patients in our study categorically reject any form of organ trading, most of them don't see why an altruistic donation should not be pos-

sible. The challenge will be to see if one can be had without the other.

A possible advantage of nondirected living donation is that it excludes pressure on the donor resulting from the relationship to the prospective recipient or family members. In genetically or emotionally related living organ donation, decisions are always made within the context of a family system, even when no overt pressure is exerted. In our study we noted a significant gender imbalance, with mothers, wives, and sisters donating much more frequently than their male counterparts. The same tendency can be found in the national figures for living donation in Germany (63 % female vs 37 % male living kidney donors in 1998) and in the United States (UNOS reports 58 % female vs 42 % male living kidney donors in 1998). The decisions of these women may well be motivated by their role within the family as the caring, supporting ones. It shall be interesting to see whether the same gender pattern will appear in the Minnesota program or whether it will elicit a gender-neutral or even predominantly male response.

As has been pointed out rightly [2], there are procedural aspects, like financial compensation or the selection process of potential donors, that need to be double-checked for ethical pitfalls. Certainly protection from exploitation has to come first; pressuring people into living organ donation by whatever

means or arguments is unacceptable. But given a satisfactory regulatory framework could be worked out, the national laws and professional guidelines prohibiting nondirected organ donation might have to be reconsidered.

## **References**

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